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PART B - ISSUE FEE TRANSMITTAL

585-242

30-561

B

**MAILING INSTRUCTIONS:** This form should be used for transmitting the ISSUE FEE. Blocks 2 through 6 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advanced orders and notification of maintenance fees will be mailed to addressee entered in Block 1 unless you direct otherwise, by: (a) specifying a new correspondence address in Block 3 below; or (b) providing the PTO with a separate "FEE ADDRESS" for maintenance fee notifications with the payment of Issue Fee or thereafter. See reverse for Certificate of Mailing.

## 1. CORRESPONDENCE ADDRESS

ROBERT E. MALM  
16624 PEQUENO PLACE  
PACIFIC PALISADES, CA 90272

## 2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)

INVENTOR'S NAME

Street Address

City, State and ZIP Code

CO-INVENTOR'S NAME

Street Address

City, State and ZIP Code

 Check if additional changes are on reverse side

SERIES CODE/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
07/801,749	12/03/91	012	SWANN JES, G	2608 12/11/92
First Named Applicant	ROBERT E. MALM		MICHAEL L.	

TITLE OF  
INVENTION MULTI-MEMORY ELECTRONIC IDENTIFICATION TAG

	ATTY'S DOCKET NO.	CLASS-SURCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEF DUE	DATE DUE
2	9101	346	000	176 UTILITY	YES	\$585.00	02/11/93

## 3. Further correspondence to be mailed to the following:

ROBERT E. MALM  
16624 PEQUENO PLACE  
PACIFIC PALISADES, CA 90272

4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.

1 ROBERT E. MALM  
2 \_\_\_\_\_  
3 \_\_\_\_\_

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100 MG 02/01/93 07801749

DO NOT USE THIS SPACE

1 242 585.00 CK  
1 561 30.00 CK

## 5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)

(1) NAME OF ASSIGNEE:  
DAVID CORPORATION(2) ADDRESS: (City & State or Country)  
NORCO, CALIFORNIA(3) STATE OF INCORPORATION, IF ASSIGNEE IS A CORPORATION  
CALIFORNIAA.  This application is NOT assigned. Assignment previously submitted to the Patent and Trademark Office. Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS.

**PLEASE NOTE:** Unless an assignee is identified in Block 5, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

6a. The following fees are enclosed:

 Issue Fee  Advanced Order - # of Copies 10

6b. The following fees should be charged to: (Minimum of 10)

DEPOSIT ACCOUNT NUMBER 13-1239

(Enclose Part C)

 Issue Fee  Advanced Order - # of Copies \_\_\_\_\_ Any Deficiencies in Enclosed Fees (Minimum of 10)

The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.

(Signature of party in interest of record)

(Date)  
Robert E. Malm 01/21/93

NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

TRANSMIT THIS FORM WITH FEE-CERTIFICATE OF MAILING ON REVERSE

## Certificate of Mailing

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:

Box ISSUE FEE  
Commissioner of Patents and Trademarks  
Washington, D.C. 20231

on Jan. 21, 1993  
(Date)

ROBERT E. MALM  
(Name of person making deposit)

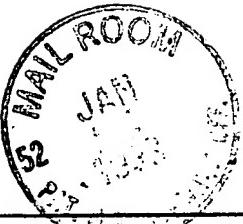
Robert E. Malm  
(Signature)

Jan. 21, 1993  
(Date)

Note: If this certificate of mailing is used, it can only be used to transmit the Issue Fee. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawings, must have its own certificate of mailing.

101 00 05101103 03801348  
101 00 05101103 03801348  
30.00 CK 1 291 1 245 282.00 CK

This form is estimated to take 20 minutes to complete. Time will vary depending upon the needs of the individual applicant. Any comments on the amount of time you require to complete this form should be sent to the Office of Management and Organization, Patent and Trademark Office, Washington, D.C. 20231 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.



## PART C - CHARGE TO DEPOSIT ACCOUNT

## 1. CORRESPONDENCE ADDRESS

ROBERT E. MOLIN  
ADVOCATE FOR PATENTS  
DEPT. OF THE TREASURY, WASHINGTON, D.C.

APPLICANT'S NAME		EXAMINER'S NAME		SEARCHER'S NAME		PRACTICING ATTORNEY	
ROBERT E. MOLIN		DENNIS L. HARRIS		JOHN R. COOPER		JOHN R. COOPER	
ISSUE FEE		RECEIVED					
FEE IS HEREBY REMITTED PURSUANT TO THE FEE CHARGE FORM							
ATTY'S DOCKET NO.	CLASS-SUBCLASS	EXAMINER	APPN. TYPE	SMALL ENTITY	PRAC. ATTY.	PRAC. ATTY.	PRAC. ATTY.
100-1000	100-1000	100-1000	100-1000	100-1000	100-1000	100-1000	100-1000
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2a. The following fees are enclosed:

Issue Fee    Advanced Order - # of Copies 10  
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 Any Deficiencies in Enclosed Fees   (Minimum of 10)

The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.

(Signature of party in interest of record)

*Robert E. Molin*   (Date) 01/21/93

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TRANSMIT THIS FORM WITH PART R WHEN AUTHORITY IS GRANTED